PUBLIC DISCLOSURE COPY

		E	Exempt Organization Busin	ess	Income Tax	Return		OMB N	o. 1545-0687	
Form	990-T	(and proxy tax under section 6033(e))								
		For cale		20	015					
Departm	ent of the Treasury		ndar year 2015 or other tax year beginning ormation about Form 990-T and its instructi				ot.			
	Revenue Service		not enter SSN numbers on this form as it may be			-		oen to Pul 01(c)(3) Oi	blic Inspection f rganizations On	for ily
	heck box if ddress changed		Name of organization (Check box if name ch	anged a	and see instructions.)	D			fication numbe	
	pt under section	.	LUMINA FOUNDATION FOR EDUCATION, II	NC.			(Employ	ees' trust,	see instructions	s.)
_	n(C)(3)	Print or	Number, street, and room or suite no. If a P.O. box,	see ins	structions.			35-1813	3228	
40	08(e) 220(e)	Type	30 S MERIDIAN ST, SUITE 700			E			ss activity code	es
40	08A 🗌 530(a)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	City or town, state or province, country, and ZIP or	foreign	postal code		(See Ins	tructions.)	
	!9(a)		INDIANAPOLIS, IN 46204				9000	99		
C Book at en	value of all assets d of year		oup exemption number (See instructions.							
	1,193,318,361		eck organization type 🕨 🔽 501(c) corp				01(a) ti	rust [Other tru	st
			n's primary unrelated business activity.							
			e corporation a subsidiary in an affiliated grou	-		controlled grou	ıp? .	. 🕨 📋	Yes 🗹 No	0
			and identifying number of the parent corp	oratio				()		
	_		JULIE K. SHEWMAKER			one number		(317)	951-5300	
			e or Business Income		(A) Income	(B) Exper	nses		(C) Net	_
1a	Gross receipts Less returns and a			1.	0					
b				1c 2	0		_			_
2 3	-	-	chedule A, line 7)	2	0		_	-	0	_
_			line 2 from line 1c	3 4a	103,568				103,568	—
4a b			1797, Part II, line 17) (attach Form 4797)	4a 4b	730,565				730,565	—
C				40 4c	0				0	—
5			erships and S corporations (attach statement)	5	(3,079,918)			(3	,079,918)	—
6		-		6	0		0	(0,	0	—
7			ced income (Schedule E)	7	0		0		0	
8			and rents from controlled organizations (Schedule F)	8	0		0		0	—
9		-	tion 501(c)(7), (9), or (17) organization (Schedule G)	9	0		0		0	—
10			ivity income (Schedule I)	10	0		0		0	
11	-		Schedule J)	11	0		0		0	
12	-	•	ructions; attach schedule)	12	0				0	
13	Total. Combin			13	(2,245,785)		0	(2,	,245,785)	_
Part	Deduction	ns Not	Taken Elsewhere (See instructions for	r limita	ations on deduct	ions.) (Excep	t for co	ontribut	ions,	
	deduction	s must	be directly connected with the unrelate	ed bus	siness income.)					
14	Compensation	n of offic	cers, directors, and trustees (Schedule K)				14		29,782	
15	Salaries and w	0					15	-	50,440	
16			ance				16		0	
17							17		0	
18			lule)				18		0	
19 00							19		21,037	
20			ns (See instructions for limitation rules) .		1 1	1	20		0	
21			Form 4562)			2,295			0.005	
22 23			imed on Schedule A and elsewhere on re			Ű	22I 23	-	2,295 80,462	
23 24			rred compensation plans				23	-	00,402	—
24 25			grams				24	-	2,864	—
26			nses (Schedule I)				26	-	0	—
27			sts (Schedule J)				27	-	0	
28			ach schedule)				28		569,159	—
29		-	Id lines 14 through 28				29		756,039	
30			xable income before net operating loss de				30		,001,824)	
31			duction (limited to the amount on line 30)				31		0	
32			axable income before specific deduction.				32		,001,824)	
33	Specific deduc	ction (G	enerally \$1,000, but see line 33 instructio	ns for	exceptions) .		33		0	
34			taxable income. Subtract line 33 from lir							
	enter the smal	ler of ze	ero or line 32				34	(3.	,001,824)	

For Paperwork Reduction Act Notice, see instructions.

Form 99	0-T (2015)						Page 2
Part	III Ta	ax Computation					1
35		zations Taxable as Corports (sections 1561 and 1563			ion. Controlled gro	pup	
а	Enter y (1) \$	our share of the \$50,000, \$ (2)		axable income brac (3) \$	kets (in that order):		
b		rganization's share of: (1) A itional 3% tax (not more the			\$ \$	_	
с	Income	tax on the amount on line	34			▶ 35c	0
36		Taxable at Trust Rat ount on line 34 from: □ Ta				on 36	
37	Proxv 1	ax. See instructions .				▶ 37	
38	-	tive minimum tax				. 38	
39		Add lines 37 and 38 to line					0
Part I	V Ta	ax and Payments	· · · · · · · · · · · · · · · · · · ·				I
40a		tax credit (corporations attac	ch Form 1118; trusts attach	Form 1116) .	40a		
b		redits (see instructions) .			40b		
с		I business credit. Attach Fo			40c		
d	Credit f	or prior year minimum tax ((attach Form 8801 or 882	7)	40d		
е		redits. Add lines 40a throu				. 40e	0
41	Subtrac	t line 40e from line 39 .				. 41	0
42		kes. Check if from: 🗌 Form 42					0
43		ax. Add lines 41 and 42.				. 43	0
44a		nts: A 2014 overpayment ci			44a 507,916		
b	2015 es	stimated tax payments			44b 450,000		
с		oosited with Form 8868			44c		
d	Foreign	organizations: Tax paid or	r withheld at source (see i	nstructions) .	44d		
е	Backup	withholding (see instructio	ons)		44e		
f	Credit f	or small employer health in	nsurance premiums (Attac	h Form 8941).	44f		
g	Other c	redits and payments:	Form 2439				
	E Form	n 4136	Other		44g 0		
45	Total p	ayments. Add lines 44a th	rough 44g	<u> </u>		. 45	957,916
46	Estimat	ed tax penalty (see instruct	tions). Check if Form 222) is attached		46	0
47	Tax du	e. If line 45 is less than the	total of lines 43 and 46, e	nter amount owed		▶ 47	0
48	Overpa	yment. If line 45 is larger the	han the total of lines 43 a	nd 46, enter amoun	t overpaid	▶ 48	957,916
49		e amount of line 48 you want:					0
Part	V Si	tatements Regarding C	Certain Activities and (Other Information	n (see instructions)	1	
1		time during the 2015 calend					
		financial account (bank, se					
		Form 114, Report of Fore	eign Bank and Financial A	ccounts. If YES, er	nter the name of th	e foreign coun	try
	here 🕨						····· 🖌 🖌
2	-	he tax year, did the organization		-	r of, or transferor to,	a foreign trust?	. 🖌
_		see instructions for other for	U				
$\frac{3}{2}$		ne amount of tax-exempt in			ar 🕨 \$	102,1	90
		-Cost of Goods Sold. E					
1		ry at beginning of year	1 0		end of year		0
2	Purcha		2 0		oods sold. Subtr line 5. Enter here a		
3 4a		labor	3 0				
44		schedule)	10			-	0 to Yes No
F	-		4a 0 4b 0		s of section 263A oduced or acquirec	• •	
		osts (attach schedule)	4b 0 5 0	to the organ		i ioi resalej ap	
5		Add lines 1 through 4b penalties of perjury, I declare that I h		-		he best of my know	edge and belief it is
Sign		prrect, and complete. Declaration of p				ledge.	
Here							discuss this return parer shown below
	· · · · · · · · · · · · · · · · · · ·	ure of officer	// Date			(see instructi	ons)? [Yes No
		Print/Type preparer's name	Preparer's signati	ire A h	L Date		PTIN
Paid		NICOLE M BENCIK		Here	Date 11/7/16	Check if self-employed	P00756195
Prepa		Firm's name ► CROWE HC	ORWATH LLP	- U U	I	Firm's EIN ►	35-0921680
Use (Only	T IIII O Haillo F	R CROSSING PARKWAY, S	JITE 300, POST OFF	ICE BOX 40977, IND		317) 569-8989
			., -		,		orm 990-T (2015)



Department of Treasury Internal Revenue Service Ogden UT 84201

Notice	CP211A
Tax period	December 31, 2015
Notice date	June 13, 2016
Employer ID number	35-1813228
To contact us	Phone 1-877-829-5500
	FAX 801-620-5555

Page 1 of 1

186000.670356.382617.1437 1 AT 0.399 370

LUMINA FOUNDATION FOR EDUCATION INC 30 S MERIDIAN ST STE 700 INDIANAPOLIS IN 46204-3568

186000

Important information about your December 31, 2015 Form 990T

We approved your Form 8868, Application for Extension of Time To File an Exempt Organization Return

We approved the Form 8868 for your	What you need to do				
December 31, 2015 Form 990T. Your new due date is November 15, 2016.	File your December 31, 2015 Form 990T by November 15, 2016. Visit www.irs.gov/charities to learn about approved e-File providers, what types of returns can be filed electronically, and whether you are required to file electronically.				
Additional information	 Visit www.irs.gov/cp211a. For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676). Keep this notice for your records. 				
	Consistent as a strength agrees to adversariate or and particular to be the test of the sector of th				

If you need assistance, please don't hesitate to contact us.

Schedule C-Rent Income (see instructions)	e (From Real F	Prop	erty and	d Person	al Property I	_e	ased With Real Pro	perty)
1. Description of property								
(1)								
(2)								
(3)								
(4)								
()	2. Rent received o	or accru	ued					
for personal property is more than 10% but not percentage			tage of rent	for personal	property (if the property exceeds profit or income)			connected with the income 2(b) (attach schedule)
(1)								
(2)								
(3)								
(4)								
Total	0 To	tal				0		
(c) Total income. Add totals of contract of the second sec	olumns 2(a) and 2((b). En	iter ▶			0	(b) Total deductions. Enter here and on page ⁻ Part I, line 6, column (B)	
Schedule E-Unrelated D			me (see	instructio	ns)	- 1		
	bt-financed property		(2. Gross allocable	income from or to debt-financed	- 1-	3. Deductions directly con debt-financ a) Straight line depreciation	
				k	property		(attach schedule)	(attach schedule)
(1)								
(2)								
(3)								
(4)								
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average ad of or allo debt-finance (attach so	cable t ed prop	o perty	4	Column divided column 5	divided (column 2 x column 6) (col		8. Allocable deductions (column 6 × total of columns 3(a) and 3(b))
			,		%			
(1)					%			
(2)								
(3)					%			
(4) Totals					<u>%</u>		nter here and on page 1, Part I, line 7, column (A). 0	Enter here and on page 1, Part I, line 7, column (B).
Total dividends-received deduct	tions included in c	· · olumi	 n.8	 				
Schedule F-Interest, Ann					Controlled O	ra		ations)
					Organizations			
1. Name of controlled organization	2. Employer identification numl			ated income nstructions)	 Total of specif payments mad 		5. Part of column 4 that is included in the controlling organization's gross incom	connected with income
(1)								
(2)								
(3)								
(4)								
Nonexempt Controlled Organi	zations							
7. Taxable Income	8. Net unrelate (loss) (see ins			9. Total of specified payments made			10. Part of column 9 that is included in the controlling organization's gross incom	connected with income in
(1)								
(2)								
(3)								
(4)								
()			I				Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).
Totals							•	0 0 Form 990-T (2015)

Form 990-T (2015)								Page 4
Schedule G-Investment Incon	ne of a Section	501(c)(7), (9),	or (17) Organi	zation (see inst	ruction	s)	
1. Description of income	2. Amount of inco		3. dire	Deductions ctly connected ach schedule)	4. Set-aside (attach schedu	s	5. To and s	otal deductions et-asides (col. 3 plus col. 4)
(1)								
(2)								
(3)								
(4)								
	Enter here and on Part I, line 9, colur						Enter he Part I, li	re and on page 1, ne 9, column (B).
Totals		0						0
Schedule I-Exploited Exempt	Activity Incom	e, Oth	er Than	Advertising In	come (see inst	ruction	s)	
1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Ex dii conne produ unr	penses rectly cted with uction of elated ss income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Ex attribu	xpenses utable to umn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)								
(4)								
	Enter here and on page 1, Part I, line 10, col. (A).	page	ere and on 1, Part I, I, col. (B).		L	<u> </u>		Enter here and on page 1, Part II, line 26.
Totals Schedule J—Advertising Incon			0					0
Part I Income From Period			Concoli	datad Pasia				
Fait Income From Fenot		ona	Consoli			1		
1. Name of periodical	2. Gross advertising income		Direct sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income		adership osts	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)								
(2)				-				-
(3)				-				-
(4)				-				-
()								
Totals (carry to Part II, line (5))	• 0		0	0	0		0	0
Part II Income From Period	-	ona				listed i		-
2 through 7 on a line-			ocpurat				in art i	
				4. Advertising				7. Excess readership
1. Name of periodical	2. Gross advertising income		Direct sing costs	gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income		adership osts	costs (column 6 minus column 5, but not more than column 4).
(1)								
(2)								
(3)								
(4)								
Totals from Part I	• 0		0					0
	Enter here and on page 1, Part I, line 11, col. (A).	page	ere and on 1, Part I, , col. (B).					Enter here and on page 1, Part II, line 27.

Totals, Part II (lines 1-5) ►	0	0	
Schedule K-Compensation of	Officers, Direc	tors, and Tru	stees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1) OFFICERS		100 %	29,782
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14	· · · · · · · · · · · · · ·	🕨	29,782

Form **990-T** (2015)

0

Name of Partnership	EIN	Amount
Investments		
(1) Abrams Capital Partners II, LP	04-3455023	-231,421
(2) AG REALTY FUND IX, LP	47-1483532	-30,467
(3) ALPINE INVESTORS V, LP	46-3847907	-230,152
(4) BAUPOST VALUE PARTNERS, L.PIV	26-2208448	41,294
(5) BLACKSTONE CAPITAL PARTNERS (CAYMAN) V-NQ L.P.	98-0627222	-298
(6) Carmel Partners Investment Fund IV, LP	90-0781000	370,051
(7) CHARLESBANK EQUITY FUND VII, LP	32-0280123	41,201
(8) Charlesbank Equity Fund VIII, LP	47-1109521	-27,770
(9) Energy Capital Partners Mezzanine Opportunities Fund A, LP	90-0811770	104,088
(10) ENERGY SPECTRUM PARTNERS VII LP	47-1453458	-42,851
(11) GREAT HILL EQUITY PARTNERS IV, LP	26-2787568	-1,925
(12) H.I.G. BAYSIDE DEBT & LBO FUND II, LP	26-2239180	2,780
(13) H.I.G. CAPITAL PARTNERS IV, L.P.	20-5466741	-614
(14) H.I.G. CAPITAL PARTNERS V, L.P.	46-1864052	-6,493
(15) H.I.G. EUROPE CAPITAL PARTNERS, L.P.	98-0533386	1,040
(16) H.I.G. Growth Buyouts & Equity Fund II, L. P.	45-1661689	-2,488
(17) Iron Point Real Estate Partners II	45-2465294	-139,875
(18) IRON POINT REAL ESTATE PARTNERS III, LP	35-2508362	-130,329
(19) Lime Rock Partners VI, L. P.	98-1027307	-859,159
(20) MERCED PARTNERS IV, L.P.	36-4756959	-50,897
(21) NATURAL GAS PARTNERS IX, LP	26-0632609	9,089
(22) OCM REAL ESTATE OPPORTUNITIES FUND III, LP	01-0709496	6,341
(23) RETHINK EDUCATION, LP	37-1689659	-821
(24) Stonehill Institutional Partners LP	13-3982121	35,139
(25) Stonelake Opportunity Partners III, LP	80-0878134	-14,851
(26) TAILWATER E&P Opportunity Fund II, LP	47-4098699	-1,862,719
(27) VENTURE INVESTMENT ASSOCIATES VI, LP	20-5196244	-17,448
(28) WALTON STREET REAL ESTATE FUND V, LP	20-3719884	-40,363
	Total for Part I, Line 5	-3,079,918

Description	Amount
Investment Expense	
(1) AL STATE INCOME TAX	19
(2) AZ STATE INCOME TAX	50
(3) CA STATE INCOME TAX	10
(4) CT STATE INCOME TAX	304
(5) DC STATE INCOME TAX	250
(6) FL STATE INCOME TAX	1,183
(7) GA STATE INCOME TAX	1,019
(8) IL STATE INCOME TAX	908
(9) MA STATE INCOME TAX	8,270
(10) MD STATE INCOME TAX	1,881
(11) MN STATE INCOME TAX	3,593
(12) MO STATE INCOME TAX	958
(13) NC STATE INCOME TAX	189
(14) NM STATE INCOME TAX	50
(15) NY STATE INCOME TAX	250
(16) TN STATE INCOME TAX	100
(17) VA STATE INCOME TAX	2,003
Total	21,037
Total for Part II, Line 19	21,037

Form 990T Part II, Line 20

Charitable Contributions Carryforward Schedule

Year Generated	Amount Generated	Amount Used in Prior Years	Amount Used in Current Year	Amount Remaining	Charitable Contribution Expires
2015	1,243	0	0	1,243	2020
Totals	1,243	0	0	1,243	

Description	Amount
Investment Expense	
(1) Occupancy	6,800
(2) Printing	198
(3) Tax Preparation Fees	17,250
(4) Legal Fees	23,050
(5) Travel	1,615
(6) Consulting	507,148
(7) Other Expense	13,098
1	Total 569,159
Total for Part II, Lin	e 28 569,159

Capital Gains and Losses

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T.

▶ Information about Schedule D (Form 1120) and its separate instructions is at www.irs.gov/form1120.

2015

Name					Employ	er ider	ntification number
LUM	INA FOUNDATION FOR EDUCATION, INC						35-1813228
Pa	rt I Short-Term Capital Gains and Losses –	Assets Held O	ne Year or Less	S			
	See instructions for how to figure the amounts to enter on the lines below. This form may be easier to complete if you round off cents to whole dollars.	(d) Proceeds (sales price)	(e) Cost (or other basis)			(s)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a	Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b						
1b	Totals for all transactions reported on Form(s) 8949 with Box A checked						
2	Totals for all transactions reported on Form(s) 8949 with Box B checked						
3	Totals for all transactions reported on Form(s) 8949	110 704					110 704
	with Box C checked	-119,724					-119,724
4	Short-term capital gain from installment sales from For				•••	4	
5	Short-term capital gain or (loss) from like-kind exchang	es from Form 8824			• •	5	
6	Unused capital loss carryover (attach computation) .					6	()
7	Net short-term capital gain or (loss). Combine lines 1a t	throuah 6 in columr	ıh			7	-119,724
	rt II Long-Term Capital Gains and Losses –			/ear			
	See instructions for how to figure the amounts to enter on the lines below.	(d)	(e)		tments to		(h) Gain or (loss) Subtract column (e) from
	This form may be easier to complete if you round off cents to whole dollars.	Proceeds (sales price)	Cost (or other basis)	8949, Pa column (rt II, line 2		column (d) and combine the result with column (g)
8a	Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b						
8b	Totals for all transactions reported on Form(s) 8949 with Box D checked						
9	Totals for all transactions reported on Form(s) 8949 with Box E checked						
10	Totals for all transactions reported on Form(s) 8949 with Box F checked	223,292					223,292
11	Enter gain from Form 4797, line 7 or 9					11	730,565
12	Long-term capital gain from installment sales from Forr	m 6252, line 26 or 3	7			12	
13	Long-term capital gain or (loss) from like-kind exchange	es from Form 8824				13	
14	Capital gain distributions (see instructions)					14	
15	Net long-term capital gain or (loss). Combine lines 8a th	nrouah 14 in columi	nh			15	953,857
	t III Summary of Parts I and II						,,
16	Enter excess of net short-term capital gain (line 7) over	net long-term capit	al loss (line 15)			16	
17	Net capital gain. Enter excess of net long-term capital g	gain (line 15) over n	et short-term capit	al loss (l	ine 7)	17	834,133
18	Add lines 16 and 17. Enter here and on Form 1120, pag Note: If losses exceed gains, see Capital losses in		roper line on other	returns		18	834,133
For F	Paperwork Reduction Act Notice, see the Instructions fo		Cat. No. 1146	60M		Sche	edule D (Form 1120) (2015)

4626 Form

Department of the Treasury Internal Revenue Service

Alternative Minimum Tax—Corporations

OMB No. 1545-0123

2015

► Attach to the corporation's tax return.

▶ Information about Form 4626 and its separate instructions is at www.irs.gov/form4626.

Name		Employer id	entifica	ation number
LUMI	NA FOUNDATION FOR EDUCATION	35-1813	228	
	Note: See the instructions to find out if the corporation is a small corporation exempt f alternative minimum tax (AMT) under section 55(e).	rom the		
1	Taxable income or (loss) before net operating loss deduction		1	(3,001,824)
2	Adjustments and preferences:			
а	Depreciation of post-1986 property	+	2a	8,431
b	Amortization of certified pollution control facilities.	+	2b	
C	Amortization of mining exploration and development costs	+	2c	
d	Amortization of circulation expenditures (personal holding companies only)	+	2d	
e	Adjusted gain or loss		2e	(4)
t	Long-term contracts		2f	
g	Merchant marine capital construction funds.	+	2g	
h :	Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)	+	2h 2i	
i	Tax shelter farm activities (personal service corporations only)	+	2j	
J k		+	2j 2k	
I N		+	21	
m	Tax-exempt interest income from specified private activity bonds		2m	
n		+	2n	
0	Other adjustments and preferences		20	930,274
3	Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 20.	t	3	(2,063,123.00)
				,
4	Adjusted current earnings (ACE) adjustment:			
а		63,123		
b	Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a			
	negative amount (see instructions).	0.00		
С	Multiply line 4b by 75% (.75). Enter the result as a positive amount 4c	0.00		
d	Enter the excess, if any, of the corporation's total increases in AMTI from prior			
	year ACE adjustments over its total reductions in AMTI from prior year ACE			
	adjustments (see instructions). Note: You must enter an amount on line 4d (even if line 4b is positive).			
е	ACE adjustment.			
U	If line 4b is zero or more, enter the amount from line 4c		4e	0.00
	• If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount			0.00
5	-		5	(2,063,123.00)
6	Alternative tax net operating loss deduction (see instructions).	+	6	(270037123.00)
7	Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a	+		
-	interest in a REMIC, see instructions		7	
8	Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on line	e 8c):		
а	Subtract \$150,000 from line 7 (if completing this line for a member of a			
	controlled group, see instructions). If zero or less, enter -0			
b	Multiply line 8a by 25% (.25)			
С	Exemption. Subtract line 8b from \$40,000 (if completing this line for a member of a controlled see instructions). If zero or less, enter -0-		8c	
9	Subtract line 8c from line 7. If zero or less, enter -0	f (1)	9	
10	Multiply line 9 by 20% (.20)	+	10	
11	Alternative minimum tax foreign tax credit (AMTFTC) (see instructions).		11	
12	Tentative minimum tax. Subtract line 11 from line 10.		12	
13	Regular tax liability before applying all credits except the foreign tax credit	+	13	
14	Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0 Enter here	t		
	Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return		14	
For Pa	perwork Reduction Act Notice, see separate instructions.			Form 4626 (2015)

ISA

Form	8949	
onn		

Sales and Other Dispositions of Capital Assets

OMB No. 1545-0074

45

20

Attachment

Department of the Treasury Internal Revenue Service Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

2, 3, 8b, 9, and 10 of Schedule D. Sequence No. 12A Social security number or taxpayer identification number

Name(s) shown on return	Social security number or taxpayer identification number
LUMINA FOUNDATION FOR EDUCATION, INC	35-1813228
Defense way about Day A. D. an O balance and whather you reactived any Farma() 1000 D are	whetitute statement(s) from when here here A substitute

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part I Short-Term. Transactions involving capital assets you held 1 year or less are short term. For long-term transactions, see page 2.

Note: You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 1a; you aren't required to report these transactions on Form 8949 (see instructions).

You *must* check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

(B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

✓ (C) Short-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	Date Sold of	Proceeds	(e) If you enter an enter a const or other basis. See the Note below See the set		f any, to gain or loss. amount in column (g), ode in column (f). arate instructions.	(h) Gain or (loss). Subtract column (e)
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)		and see <i>Column (e)</i> in the separate instructions	(f) Code(s) from instructions	(g) Amount of adjustment	from column (d) and combine the result with column (g)
FROM PASS THROUGH ENTITIES	VARIOUS	VARIOUS					-119,724
2 Totals. Add the amounts in columns negative amounts). Enter each tota Schedule D, line 1b (if Box A above above is checked), or line 3 (if Box C	I here and incl is checked), lin	ude on your le 2 (if Box B					-119,724
Note: If you checked Box A above bu			RS was incorrect,	enter in column (e	e) the basis a	as reported to the	

For Paperwork Reduction Act Notice, see your tax return instructions.

adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2015)		Attachment Sequence No. 12A	Page 2
Name(c) shown on return. Name and SSN or taxpayor identification no. not required if shown on other side	Social security n	under or taxpaver identification numb	er

LUMINA FOUNDATION FOR EDUCATION

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker. A substitute statement will have the same information as Form 1099-B. Either will show whether your basis (usually your cost) was reported to the IRS by your broker and may even tell you which box to check.

Part II Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note: You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the totals directly on Schedule D, line 8a; you aren't required to report these transactions on Form 8949 (see instructions).

35-1813228

You *must* check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

(D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see **Note** above)

(E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS

(F) Long-term transactions not reported to you on Form 1099-B

1 (a) Description of property	(b) Date acquired	(c) Date sold or	(d) Proceeds	(e) Cost or other basis. See the Note below			(g), (h) Gain or (loss).	
(Example: 100 sh. XYZ Co.)	(Mo., day, yr.)	disposed of (Mo., day, yr.)	(sales price) (see instructions)	and see Column (e) in the separate instructions	(f) (g) Code(s) from instructions Amount of adjustment			
FROM PASS THROUGH ENTITIES	VARIOUS	VARIOUS					223,292	
2 Totals. Add the amounts in columns negative amounts). Enter each total Schedule D, line 8b (if Box D above	here and includ is checked), lin	e on your e 9 (if Box E						
above is checked), or line 10 (if Box Note: If you checked Box D above bu			RS was incorrect	enter in column (e) the basis a	as reported to the	223,292 IBS, and enter an	

Note: If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

Form 8949 (2015)

Form 479)7
-----------------	----

Department of the Treasury

Internal Revenue Service

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

OMB No. 1545-0184

20

Attach to your tax return. ▶ Information about Form 4797 and its separate instructions is at www.irs.gov/form4797.

Attachment Sequence No. 27

15

Name(s)	shown	on	return

Nam	e(s) shown on return					Identifying r	numbe	r
LUM	INA FOUNDATION FOR EDU	JCATION, INC					35-181	13228
1	Enter the gross proceeds substitute statement) that						1	
Pa	rt I Sales or Exchan Than Casualty o	ges of Proper	ty Used in a T	rade or Busines	ss and Involunta	ary Conver	sions	From Other
2	(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or o basis, plu improvements expense of s	is s and	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
3	Gain, if any, from Form 4684	4, line 39					3	
4	Section 1231 gain from insta						4	
5	Section 1231 gain or (loss) f		-				5	
6	Gain, if any, from line 32, fro	m other than casu	alty or theft.				6	
7	Combine lines 2 through 6.	Enter the gain or (le	oss) here and on t	he appropriate line a	s follows:		7	
	Partnerships (except elec instructions for Form 1065,							
	Individuals, partners, S co line 7 on line 11 below and losses, or they were recap Schedule D filed with your re	skip lines 8 and 9 tured in an earlier	 If line 7 is a gather year, enter the gather 	in and you did not h gain from line 7 as	lave any prior year s	section 1231		
8	Nonrecaptured net section	1231 losses from p	rior years (see ins	structions)			8	
9	Subtract line 8 from line 7. I	f zero or less ente	r -0- If line 9 is ze	ero enter the gain fro	om line 7 on line 12 h	elow If line		
Ū	9 is more than zero, enter	the amount from I	ine 8 on line 12 b	below and enter the	gain from line 9 as	a long-term		
Dai	capital gain on the Schedule						9	
	Ordinary gains and losses n				1 year or less):			
			VARIOUS					
F <u>ROM</u>	I PASS THROUGH ENTITIES	VARIOUS	VARIOUS					730,565
								(
11	Loss, if any, from line 7 .						11	
12	Gain, if any, from line 7 or a	mount from line 8,	if applicable .				12	
13							13	
14	Net gain or (loss) from Form						14	
15	Ordinary gain from installme	ent sales from Form	n 6252, line 25 or 3	36			15	
16	Ordinary gain or (loss) from	like-kind exchange	es from Form 8824	4			16	
17	Combine lines 10 through 1	6					17	730,565
18	For all except individual retu and b below. For individual	-			ne of your return and	l skip lines a		
я	If the loss on line 11 includes				art of the loss here F	nter the nart		
4	of the loss from income-prod					•		
	used as an employee on Sch	0117	``	,, ,		,	18a	
b	Redetermine the gain or (los		•				18h	

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 13086I

Form 4797 (2015)

19	(a) Description of section 1245, 1250, 1252, 1254, or 125		(b) Date acq (mo., day,		(c) Date sold (mo., day, yr.)		
A							
В							
C							
D				1			
	These columns relate to the properties on lines 19A through 19D	. ►	Property A	Property B	Property	/ C	Property D
20	Gross sales price (Note: See line 1 before completing.) .	20					
21	Cost or other basis plus expense of sale	21					
22	Depreciation (or depletion) allowed or allowable	22					
23	Adjusted basis. Subtract line 22 from line 21	23					
24	Total gain. Subtract line 23 from line 20	24					
25	If section 1245 property:						
а	Depreciation allowed or allowable from line 22	25a					
b	Enter the smaller of line 24 or 25a	25b					
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.						
	Additional depreciation after 1975 (see instructions) .	26a					
	Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	26b					
с	Subtract line 26a from line 24. If residential rental property						
	or line 24 is not more than line 26a, skip lines 26d and 26e	26c					
	Additional depreciation after 1969 and before 1976.	26d					
e f	Section 291 amount (corporations only)	26e 26f					
u u	Add lines 26b, 26e, and 26f.	26g					
27		209					
21	If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).						
а	Soil, water, and land clearing expenses	27a					
b	Line 27a multiplied by applicable percentage (see instructions)	27b					
с	Enter the smaller of line 24 or 27b	27c					
28	If section 1254 property:						
а	Intangible drilling and development costs, expenditures for development of mines and other natural deposits,						
	mining exploration costs, and depletion (see						
	instructions)	28a					
	Enter the smaller of line 24 or 28a	28b					
29	If section 1255 property:						
а	Applicable percentage of payments excluded from						
	income under section 126 (see instructions)	29a					
	Enter the smaller of line 24 or 29a (see instructions) . mary of Part III Gains. Complete property colur	29b	through D through	h line 20h hefer	a acina to lir	20.20	
Sun	imary of Part in Gains. Complete property colur	nns A		gri line 290 belon	e going to in		
30							
31							
32	Subtract line 31 from line 30. Enter the portion from casu						
Par				 on Ducinese II.		32	
rar	Recapture Amounts Under Sections 17 (see instructions)	9 and	i ∠80F(D)(2) Wh	en Business Us	-		
					(a) Section 179	วท	(b) Section 280F(b)(2)

33 33 Section 179 expense deduction or depreciation allowable in prior years. . Recomputed depreciation (see instructions) 34 34 35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report 35

Form 4797 (2015)

Department of the Treasury

Internal Revenue Service

Underpayment of Estimated Tax by Corporations

OMB No. 1545-0123

2015

Employer identification number

35-1813228

► Attach to the corporation's tax return.

Information about Form 2220 and its separate instructions is at www.irs.gov/form2220.

Name

	FOUNDATION			INC
LUIVIIINA	FUUNDATION	FUR ED	UCATION,	INC.

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

1 Total tax (see instructions) 1 0 2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 1 0 2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 1 0 2b 2c 2d 0 3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty 2d 0 4 Enter the tax shown on the corporation's 2014 income tax return (see instructions). Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5. 4 264,982 5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is using the annualized income installment method. 5 0 6 The corporation is using the annualized income installment method. 7 File corporation is using the annualized income installment method. 9 04/15/2015 06/15/2015 09/15/2015 12/15/2015 10 0 0 0 0 0 0 0 0 11 Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15 10 0 0	Par	Required Annual Payment						
2a Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 2a 2b 2c 2c 2c 2c 2c 2c 2c 2c 2c 3 2c 3 2c 4 Credit for federal tax paid on fuels (see instructions). 2c 3 Subtract line 24 from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty 2c 4 Enter the tax shown on the corporation's 2014 income tax return (see instructions). Caution: If the tax is zero or the tax year was for Filing—Check the boxes below that apply. If any boxes are checked, the corporation must file 5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 6 The corporation is using the annualized income installment method. 7 P The corporation is using the annualized income installment method. 8 The corporation is using the annualized income installment method. 9 04/15/2015 06/15/2015 09/15/2015 9 04/15/2015 06/15/2015 09/15/2015 12/15/2015 10 0 0 0								
b Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method. 2b c Credit for federal tax paid on fuels (see instructions). 2c d Total. Add lines 2a through 2c 2d 0 3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty. 3 0 4 Enter the tax shown on the corporation's 2014 income tax return (see instructions). Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 4 264,982 5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 on line 5 0 Part III Reasons for Filing—Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty (see instructions). 7 2 1 1 0 0 6 The corporation is using the adjusted seasonal installment method. 7 2 1 6 1 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 <td></td> <td></td> <td>• •</td> <td>· · · ·</td> <td>· · I</td> <td></td> <td>1</td> <td>0</td>			• •	· · · ·	· · I		1	0
contracts or section 167(g) for depreciation under the income forecast method . 2b 2c contracts or section 167(g) for depreciation under the income forecast method . 2c 2c contracts or section 167(g) for depreciation under the income forecast method . 2c 2c contracts or section 167(g) for depreciations . 2d 0 contracts or section 167(g) for depreciations . 2d 0 contracts or section 167(g) for depreciations . 2d 0 contracts or section 167(g) for depreciations . 2d 0 contracts or section 167(g) for depreciations . 2d 0 contracts or section 167(g) for depreciations . 2d 0 contracts or section 167(g) for depreciations . 2d 0 contracts or section 167(g) for depreciations . 2d 0 contracts or section 167(g) for depreciation . 2d 0 contracts or section 167(g) for depreciation . 2d 0 contracts or section . 2d 0 0 contracts or section . 2d 0 2d 0 contracts or section . 2d 0 0 0 0 contracts or secti				-	2a		_	
c Credit for federal tax paid on fuels (see instructions)	b			°				
d Total. Add lines 2a through 2c					2b		_	
3 Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not ove the penalty 3 0 4 Enter the tax shown on the corporation's 2014 income tax return (see instructions). Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 5 on line 5 4 264,982 5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 0 6 The corporation is using the adjusted seasonal installment method. 5 0 7 The corporation is using the adjusted seasonal installment method. 5 0 7 The corporation is a large corporation" figuring its first required installment based on the prior year's tax. 7 (a) (b) (c) (d) 9 04/15/2015 09/15/2015 09/15/2015 12/15/2015 12/15/2015 10 0 0 0 0 0 0 0 11 Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15 10 0 0 0 0 0 0 0 0 0 0 0 0 0	С	Credit for federal tax paid on fuels (see instructions)	· ·	L	2c			
does not owe the penalty 3 0 4 Enter the tax shown on the corporation's 2014 income tax return (see instructions). Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 4 264,982 5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 0 4 264,982 9 Part III Reasons for Filing — Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty (see instructions). 5 0 6 The corporation is using the annualized income installment method. 7 Y The corporation is using the annualized income installment method. 8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. 9 04/15/2015 06/15/2015 09/15/2015 12/15/2015 9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 390-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year 9 04/15/2015 06/15/2015 09/15/2015 12/15/2015 10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 6 (but not 6 or 7) is checked, esee instructions). For column (a) only, enter	d	5						0
 4 Enter the tax shown on the corporation's 2014 income tax return (see instructions). Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5. 5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3. Cautoun: Part III Reasons for Filing — Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty (see instructions). 6 ☐ The corporation is using the adjusted seasonal installment method. 7 ☑ The corporation is using the annualized income installment method. 8 ☑ The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. Part III Figuring the Underpayment (a) (b) (c) (d) 9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (<i>Form 990-PF filers</i>: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	3	Subtract line 2d from line 1. If the result is less than \$500, do not con	mplete	e or file this	form	. The corporatio	n	
the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 4 264,982 5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 0 PartIII Reasons for Filing — Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty (see instructions). 6 The corporation is using the annualized income installment method. 7 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. (a) (b) (c) (d) PartIII Figuring the Underpayment (a) (b) (c) (d) 9 (a) (b) (c) (d) 9 Out/15/2015 06/15/2015 09/15/2015 12/15/2015 12/15/2015 12/15/2015 06/15/2015 09/15/2015 09/15/2015 12/15/2015 12/15/2015 06/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 12/15/2015 06/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 12/15/2015 06/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015 09/15/2015		does not owe the penalty			·		3	0
5 Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 The corporation line 3 The corporation is using the adjusted seasonal installment method. The corporation is using the adjusted seasonal installment method. The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. Part III Figuring the Underpayment	4	Enter the tax shown on the corporation's 2014 income tax return (see ins	structio	ons). Cautio	n: If	the tax is zero o	or 🛛	
the amount from line 3 5 0 Part II Reasons for Filing — Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty (see instructions). 6 The corporation is using the adjusted seasonal installment method. 7 The corporation is using the annualized income installment method. (a) (b) (c) (d) 9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (<i>Form 990-PF filers:</i> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year (a) (b) (c) (d) 9 04/15/2015 06/15/2015 09/15/2015 12/15/2015 12/15/2015 10 0 0 0 0 0 0 11 Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15 11 657,916 807,916 957,916 957,916 12 657,916 807,916 957,916 957,916 957,916 957,916 957,916 957,916 957,916 957,916 957,916 957,916 957,916 957,916 957,916 957,916 957,916 957,916 957,916 957,916		the tax year was for less than 12 months, skip this line and enter the	e amou	unt from line	e 3 o	n line 5	4	264,982
Part III Reasons for Filing – Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty (see instructions). 6 The corporation is using the adjusted seasonal installment method. 7 ✓ The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. Part III Figuring the Underpayment 9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (<i>Form 990-PF filers:</i> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	5	Required annual payment. Enter the smaller of line 3 or line 4. If the co	orpora	tion is requir	ed to	o skip line 4, ente	er	
Form 2220 even if it does not owe a penalty (see instructions). 6 The corporation is using the adjusted seasonal installment method. 7 ✓ The corporation is using the annualized income installment method. 8 ✓ The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. Part III Figuring the Underpayment 9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (<i>Form 990-PF filers</i> : Use 5th month), 6th, 9th, and 12th months of the corporation's tax year (a) (b) (c) (d) 9 Installment. If the box on line 6 and/or line 7 above is checked, enter 1570 Soft the amounts form Schedule A, line 3 & If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in column (a) only, enter the amount from line 11 on line 15 10 0 0 0 0 11 Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15 11 657,916 150,000 10 0 0 0 12 Enter amount, if any, from line 18 of the preceding column 11 657,916 807,916 957,916 14 0 0 0 0 0 0 0 15		the amount from line 3					5	0
6 The corporation is using the adjusted seasonal installment method. 7 ✓ The corporation is using the annualized income installment method. 8 ✓ The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. Part III (a) (b) (c) (d) 9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (<i>Form 990-PF filers:</i> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year	Part	II Reasons for Filing—Check the boxes below that app	ly. If a	any boxes	are	e checked, the	e corporatior	n must file
 7 The corporation is using the annualized income installment method. 8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. 9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (<i>Form 990-PF filers:</i> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year			uctior	าร).				
8 ✓ The corporation is a "large corporation" figuring its first required installment based on the prior year's tax. Part III Figuring the Underpayment 9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (<i>Form 990-PF filers:</i> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year (a) (b) (c) (d) 9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (<i>Form 990-PF filers:</i> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year 9 04/15/2015 06/15/2015 09/15/2015 12/15/2015 10 Required installments. If the box on line 6 and/or line 7 above is enter. If none of these boxes are checked, enter 25% of line 5 above in each column 10 0 0 0 0 0 11 Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15 11 657,916 150,000 10 0 <td>6</td> <td>The corporation is using the adjusted seasonal installment method.</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	6	The corporation is using the adjusted seasonal installment method.						
Part III Figuring the Underpayment 9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year (a) (b) (c) (d) 9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year 9 04/15/2015 06/15/2015 09/15/2015 12/15/2015 10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in each column (a) only, enter the amount from line 11 on line 15 10 0	7	\checkmark The corporation is using the annualized income installment method.						
 (a) (b) (c) (d) (b) (c) (d) (c) (d) (d) (d) (d	8	✓ The corporation is a "large corporation" figuring its first required insta	allment	t based on th	ne pr	ior year's tax.		
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (<i>Form 990-PF filers:</i> Use 5th month), 6th, 9th, and 12th months of the corporation's tax year 9 04/15/2015 06/15/2015 09/15/2015 12/15/2015 10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in each column 10 0 0 0 11 Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15 11 657,916 150,000 10 0 0 12 Enter amount, if any, from line 18 of the preceding column 11 657,916 807,916 957,916 957,916 13 Add amounts on lines 16 and 17 of the preceding column 14 0 0 0 14 0 0 0 0 0 0 0 0 14 0 0 0 0 0 0 0 0 15 657,916 807,916 957,916 957,916 957,916 957,916 14 0 0	Part	III Figuring the Underpayment						
of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year904/15/201506/15/201512/15/201510Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in each column				(a)		(b)	(c)	(d)
of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year904/15/201506/15/201512/15/201510Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in each column	9	Installment due dates. Enter in columns (a) through (d) the 15th day						
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in each column								
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in each column			9	04/15/201	5	06/15/2015	09/15/2015	12/15/2015
checked, enter the amounts from Schedule A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in each column	10							
enter. If none of these boxes are checked, enter 25% of line 5 above in each column								
 each column								
11 Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15 10 <td< td=""><td></td><td></td><td>10</td><td></td><td>0</td><td>0</td><td>0</td><td>0</td></td<>			10		0	0	0	0
column (a) only, enter the amount from line 11 on line 15 11 657,916 150,000 0 Complete lines 12 through 18 of one column before going to the next column. 12 657,916 807,916 957,916 12 Enter amount, if any, from line 18 of the preceding column . 12 657,916 807,916 957,916 13 Add lines 11 and 12 . . 13 807,916 957,916 14 Add amounts on lines 16 and 17 of the preceding column . . 14 0 0 0 15 Subtract line 14 from line 13. If zero or less, enter -0- . . 15 657,916 807,916 957,916 14 0 0 0 0 0 0 0 0 15 657,916 807,916 957,916 957,916 957,916 957,916 16 If the amount on line 15 is zero, subtract line 13 from line 14. 0 0 0 0	11				-			•
Complete lines 12 through 18 of one column before going to the next column.12131412131414151515151515151516151516171617171817181816171718181718171817181817181817181718181716181716111216161317161318171613181716131817161318171613131613161316161316161316161613161616161616161616161716161617161718171717181717181718171817181718 <td>••</td> <td></td> <td>11</td> <td>657</td> <td>916</td> <td>150,000</td> <td>150.000</td> <td>0</td>	••		11	657	916	150,000	150.000	0
next column. 12 657,916 807,916 957,916 12 Add lines 11 and 12 13 807,916 957,916 957,916 13 Add amounts on lines 16 and 17 of the preceding column 13 807,916 957,916 957,916 14 Add amounts on lines 16 and 17 of the preceding column 14 0 0 0 15 Subtract line 14 from line 13. If zero or less, enter -0- 15 657,916 807,916 957,916 16 If the amount on line 15 is zero, subtract line 13 from line 14. 0 0 0					510	100,000	100,000	•
13 Add lines 11 and 12 13 807,916 957,916 957,916 14 Add amounts on lines 16 and 17 of the preceding column 14 0 0 0 15 Subtract line 14 from line 13. If zero or less, enter -0- 15 657,916 807,916 957,916 16 If the amount on line 15 is zero, subtract line 13 from line 14. 14 0 0 0								
14 Add amounts on lines 16 and 17 of the preceding column 14 0 0 0 15 Subtract line 14 from line 13. If zero or less, enter -0	12	Enter amount, if any, from line 18 of the preceding column	12			657,916	807,916	957,916
15 Subtract line 14 from line 13. If zero or less, enter -0 15 657,916 807,916 957,916 16 If the amount on line 15 is zero, subtract line 13 from line 14. 15 657,916 807,916 957,916	13		13			807,916	957,916	957,916
16 If the amount on line 15 is zero, subtract line 13 from line 14.	14	Add amounts on lines 16 and 17 of the preceding column	14			0	0	0
16 If the amount on line 15 is zero, subtract line 13 from line 14.			15	657,	916	807,916	957,916	957,916
		-	16			0	0	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line	17	Underpayment. If line 15 is less than or equal to line 10, subtract, line						
15 from line 10. Then go to line 12 of the next column. Otherwise, go								

 to line 18
 18
 Overpayment. If line 10 is less than line 15, subtract line 10 from line
 17

 18
 Overpayment. If line 10 is less than line 15, subtract line 10 from line
 18
 657,916
 807,916
 957,916

 15. Then go to line 12 of the next column
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .
 .

For Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 11746L

Form **2220** (2015)

Form 2220 (2015)

			(a)		(b)		(c)		(d)	
9	Enter the date of payment or the 15th day of the 3rd month after the close of the tax year, whichever is earlier (see instructions). <i>(Form 990-PF and Form 990-T filers:</i> Use 5th month instead of 3rd month.)	19								
0	Number of days from due date of installment on line 9 to the date shown on line 19	20	0		0		0		0	-
1	Number of days on line 20 after 4/15/2015 and before 7/1/2015	21	0		0		0		0	
2	Underpayment on line 17 \times $\frac{\text{Number of days on line 21}}{365} \times 3\%$	22	\$	0 \$	6	\$	0	\$		
;	Number of days on line 20 after 6/30/2015 and before 10/1/2015	23	0		0		0	<u> </u>	0	_
	Underpayment on line 17 × $\frac{\text{Number of days on line 23}}{365}$ × 3%	24	\$	0 \$	6	b \$	0	\$		
	Number of days on line 20 after 9/30/2015 and before 1/1/2016	25	0		0		0		0	
	Underpayment on line 17 \times $\frac{\text{Number of days on line 25}}{365} \times 3\%$	26	\$	0 \$	6	b \$	0	\$		-
	Number of days on line 20 after 12/31/2015 and before 4/1/2016	27	0		0		0		0	-
	Underpayment on line 17 \times Number of days on line 27 366 \times 3%	28	\$	0 \$	6	\$	0	\$		-
	Number of days on line 20 after 3/31/2016 and before 7/1/2016	29	0		0		0	<u> </u>	0	
	Underpayment on line 17 \times $\frac{\text{Number of days on line 29}}{366} \times \%$	30	\$	0 \$	6 (b \$	0	\$		_
	Number of days on line 20 after 6/30/2016 and before 10/1/2016	31	0		0	_	0		0	_
	Underpayment on line 17 \times $\frac{\text{Number of days on line 31}}{366} \times \%$	32	\$	0 \$	6 (\$	0	\$		
	Number of days on line 20 after 9/30/2016 and before 1/1/2017	33	0		0	_	0		0	-
	Underpayment on line 17 \times $\frac{\text{Number of days on line 33}}{366} \times \%$	34	\$	0 \$	6 (\$	0	\$		_
	Number of days on line 20 after 12/31/2016 and before 2/16/2017	35	0		0		0		0	-
	Underpayment on line 17 \times $\frac{\text{Number of days on line 35}}{365} \times \%$	36	\$	0 \$	6	\$	0	\$		_
	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	0 \$	6 (\$	0	\$		
	Penalty. Add columns (a) through (d) of line 37. Enter the total here a line for other income tax returns						ble 38	\$		

*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at *www.irs.gov.* You can also call 1-800-829-4933 to get interest rate information.

16

Form **2220** (2015)

Adjusted Seasonal Installment Method and Annualized Income Installment Method Schedule A (see instructions)

Form 1120S filers: For lines 1, 2, 3, and 21, below, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

Part I Adjusted Seasonal Installment Method (Caution: Use this method only if the base period percentage for 6 consecutive months is at least 70%. See instructions.)								
			(a)	(b)	(c)	(d)		
1	Enter taxable income for the following periods:		First 3 months	First 5 months	First 8 months	First 11 months		
а	Tax year beginning in 2012	1a						
b	Tax year beginning in 2013	1b						
с	Tax year beginning in 2014	1c						
2	Enter taxable income for each period for the tax year beginning in							
	2015 (see instructions for the treatment of extraordinary items) .	2						
3	Enter taxable income for the following periods:		First 4 months	First 6 months	First 9 months	Entire year		
а	Tax year beginning in 2012	3a						
b	Tax year beginning in 2013	3b						
с	Tax year beginning in 2014	3c						
4	Divide the amount in each column on line 1a by the amount in							
	column (d) on line 3a	4						
5	Divide the amount in each column on line 1b by the amount in							
	column (d) on line 3b	5						
6	Divide the amount in each column on line 1c by the amount in							
	column (d) on line 3c	6						
7	Add lines 4 through 6	7						
8	Divide line 7 by 3.0	8						
9a	Divide line 2 by line 8	9a						
b	Extraordinary items (see instructions)	9b						
С	Add lines 9a and 9b	9c						
10	Figure the tax on the amount on line 9c using the instructions							
	for Form 1120, Schedule J, line 2 (or comparable line of							
	corporation's return)	10						
11a	Divide the amount in columns (a) through (c) on line 3a by the							
	amount in column (d) on line 3a	11a						
b	Divide the amount in columns (a) through (c) on line 3b by the							
	amount in column (d) on line 3b	11b						
С	Divide the amount in columns (a) through (c) on line 3c by the							
	amount in column (d) on line 3c	11c						
12	Add lines 11a through 11c	12						
13	Divide line 12 by 3.0	13						
14	Multiply the amount in columns (a) through (c) of line 10 by							
	columns (a) through (c) of line 13. In column (d), enter the							
	amount from line 10, column (d)	14						
15	Enter any alternative minimum tax for each payment period (see							
	instructions)	15						
16	Enter any other taxes for each payment period (see instructions)	16						
17	Add lines 14 through 16	17						
18	For each period, enter the same type of credits as allowed on							
	Form 2220, lines 1 and 2c (see instructions)	18						
19	Total tax after credits. Subtract line 18 from line 17. If zero or							
	less, enter -0	19						

Form **2220** (2015)

Part II Annualized Income Installment Method

			(a)	(b)	(c)	(d)
			First 2	First 4	First 7	First 10
0	Annualization periods (see instructions)	20	months	months	months	months
1	Enter taxable income for each annualization period (see					
•	instructions for the treatment of extraordinary items)	21				
2	Annualization amounts (see instructions)	22	6.00000	3.00000	1.71429	1.2000
3a	Annualized taxable income. Multiply line 21 by line 22	23a	0	0	0	
b	Extraordinary items (see instructions)	23b				
С	Add lines 23a and 23b	23c	0	0	0	
4	Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2 (or comparable line of					
	corporation's return)	24	0	0	0	
5	Enter any alternative minimum tax for each payment period (see					
	instructions)	25				
3	Enter any other taxes for each payment period (see instructions)	26				
	· · · · · · · · · · · · · · · · · · ·					
7	Total tax. Add lines 24 through 26	27	0	0	0	
8	For each period, enter the same type of credits as allowed on					
•	Form 2220, lines 1 and 2c (see instructions)	28				
Э	Total tax after credits. Subtract line 28 from line 27. If zero or					
	less, enter -0	29	0	0	0	
0	Applicable percentage	30	25%	50%	75%	100%
•			2070	0070	1070	10070
1	Multiply line 29 by line 30	31	0	0	0	
art	Required Installments		4 - 4	0	Quel	441-
	Note: Complete lines 32 through 38 of one column before completing the next column.		1st installment	2nd installment	3rd installment	4th installment
2	If only Part I or Part II is completed, enter the amount in each column					
	from line 19 or line 31. If both parts are completed, enter the					
	smaller of the amounts in each column from line 19 or line 31	32	0	0	0	
3	Add the amounts in all preceding columns of line 38 (see					
-	instructions)	33		0	0	
1	Adjusted seasonal or annualized income installments.					
	Subtract line 33 from line 32. If zero or less, enter -0	34	0	0	0	
5	Enter 25% of line 5 on page 1 of Form 2220 in each column.					
,	Note: "Large corporations," see the instructions for line 10					
	for the amounts to enter	35	0	0	0	
_	Subtract line 29 of the proceeding column from line 27 of the					
6	Subtract line 38 of the preceding column from line 37 of the			0	0	
;	preceding column	36				
	preceding column		0	0	0	
	· · · · ·	36 37	0	0	0	
6 7 8	preceding column		0	0	0	